DECLARATION FOR NOMINATION State District: Public Service Commissioner 13-10-201, MCA

| | • | | Iontana and to the Electorica and resident of the | | | f | |
|--|-------------------|-----------------------|--|---|---|---------------------------|--|
| for nomination by t | he, declar | are pursuant to Sec | ction 13-10-201, Montanty for the office of Publication to be he | a Code Annota c Service Com | ated, that I am mission, District on June 3 | a candidate rict No. | |
| such purpose do aff Montana for the off | firm that I posse | ess the qualification | ns prescribed by the Cor | nstitution and la | aws of the Sta | te of | |
| 1. My full name a | s it is to appear | on the ballot is: | | | | | |
| 2. My mailing add | lress is: | | | | | | |
| 3. City, State and Zip Code | | | Phone: Home | | Work | | |
| . My e-mail address is: | | | My website addr | My website address is: | | | |
| 5. I submit herewi | th the statutory | filing fee of \$ | · | | | | |
| Candidate must sign State or deputy if del | | | nce of a Notary Public if n | nailed, or in the j | presence of the | Secretary of | |
| DATE | , | 20 (Signatu | ure of Candidate) | | _ | | |
| STATE OF MONTA | NA |) | | | | | |
| STATE OF MONTA County of | |) | | | | | |
| On this da known to me or prov he/she executed the s | ed to me to be th | , 20, 20 | , before me, personally ne is subscribed to the above | y appeared the alve declaration, an | bove named canned acknowledg | ndidate, ed to me that | |
| SEAL | | | Notary Pu | Notary Public for the State of Montana | | | |
| | | | Printed Na Residing a | Printed Name of Notary Public Residing at | | | |
| | | | My Comm By: | nission Expires_ | | _, 20 | |
| | | | · | Deputy (if | not notarized) | | |
| Submit thi | s form to the Se | cretary of State, PO | Box 202801, Helena, MT | 59620-2801, wi | ith the required | fee. | |
| | | | | | | | |
| FUK | | | under document number , Dep | | l l | | |